BEST-AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 09/090-04												PH	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER THAN SMALL ENTITY		
TC	OTAL CLAIMS						RATE		FEE		RATE	FEE	
FC	DR .	_	NUMBER FILED NUMB			ER EXTRA	BASIC FEE 355.00		OR	BASIC FEE	710.00		
TO	TAL CHARGE	ABLE CLAIMS	43 minus 20= * 2			2.3,	xs 9= 207		207	OR	X\$18=	414	
INC	EPENDENT C	LAIMS	<i>′</i> 7 mi	7 minus 3 =			X40= //		1/2	OR	X80=	320	
MU	ILTIPLE DEPEN	IDENT CLAIM P	×			+135= /35		1	.070	2 2/			
* If the difference in column 1 is less than zero, enter "0" in column 2							<u> </u>	TAL	150	OR OR	+270= TOTAL	inll	
CLAIMS AS AMENDED - PART II								IAL	×3/	OH	OTHER	THAN	
	(Column 1) (Column 1)					umn 2) (Column 3)			ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	R/	NTE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 20	Minus	4	3	=	X	9=		OR	X\$18=	0	
	Independent	. 3	Minus	/		=	X	10=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM) E			+270=		
								35= OTAL		OR	TOTAL		
	(Oakura 1) (Oakura 0) (Oakura 0)								ADDIT. FEEOR ADDIT. FEE				
AMENDMENT B	(Column 1) CLAIMS		(Column 2) (Column 3) HIGHEST					ADDI-	1		ADDI-		
		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	DUSLY	PRESENT EXTRA	R/	TE	TIONAL FEE		RATE	TIONAL FEE	
	Total	•	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	0=	7	OR	X80= ·		
	FIRST PRESENTATION OF MULTIPLE DEPE				NDENT CLAIM								
								35= Otal		OR	+270=		
								FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								-				
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO	BER BUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**	_	=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X4	0=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<u> </u>	$\stackrel{\cdot}{\dashv}$		OR	V00=		
+135= OR +270=													
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OFF TOTAL ADDIT. FEE												
		mber Previously Pai ber Previously Pai					found in	he app	oropriate box	in col	umn 1.		

Application or Docket Number